



PRODUCT REFRIGERATION PERMIT APPLICATION

TYPE OR PRINT ALL INFORMATION

(EQUIPMENT USED PRIMARILY FOR PRESERVATION, STORAGE OR SALE OF PRODUCTS OR PRODUCE)

Date: _____

☐ **COMMERCIAL**
☐ **MULTIPLE PERMIT APPLICATIONS SUBMITTED**

(Consideration for the assessment of a single \$30.00 Application Verification Fee will only be made to applications submitted for the SAME ADDRESS at the SAME TIME. This fee will be assessed to the first permit request processed.)

APPLICATION # _____ OF _____

(Please indicate the total number of applications being submitted for the SAME ADDRESS at the SAME TIME.

Ex: Application #1 of 3; Application #2 of 3; etc.)

TYPE OF PERMIT ☐ **New Construction**☐ **Alter Existing**

Bldg Permit # _____

☐ **Addition to Building**☐ **Replace**

SQ FT/Unit _____

ADDRESS OF JOB _____ City _____ Zip Code _____

Working In Unit(s) # _____ TAX DISTRICT/PARCEL # _____

Tenant Name(s) _____ Telephone (____) _____

CONTRACTOR _____ Telephone (____) _____ FAX (____) _____

Address _____ City/State _____ Zip Code _____

License # _____

SIGNATURE OF LICENSED CONTRACTOR OR AUTHORIZED SIGNER _____

PRINT OR TYPE NAME _____

PROPERTY OWNER OF RECORD _____ Telephone (____) _____ FAX (____) _____

Address _____ City/State _____ Zip Code _____

SIGNATURE OF OWNER _____

PRINT OR TYPE NAME _____

SOFT ACCOUNT # _____

AUTHORIZED SIGNATURE OF ACCOUNT _____

COMMERCIAL

PRODUCT REFRIGERATION EQUIPMENT

Self contained system less than one ton - NO FEE	# of systems
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All other product refrigeration per system by tons						
#tons	#tons	#tons	#tons	#tons	#tons	#tons

Additional evaporators on the same permit	Alteration of product refrigeration
#	#

☐ **UNDERGROUND ONLY WITH A PHASE I FOUNDATION**

ALL FEES ARE NON--REFUNDABLE

OFFICE USE ONLY

Total Fee: _____ Receipt #: _____